

Itavius Burks
54 Kerish Rd.
Forest, MS 39074

US BANKRUPTCY COURT
SOUTHERN DISTRICT OF MS
FILED

2023 FEB 10 PM 1:04

February 10, 2023

DANNY L. MILLER
CLERK
BY  DEPUTY

U.S. Bankruptcy Court
501 East Court Street, Suite 2.300
P.O. Box 2448
Jackson, MS 39225-2448
601-608-4600

Dear Sir or Madam:

I am writing to dispute the following information on my file. I have listed below the items I am needing to dispute on the attached copy of the report I received.

The item being disputed by me is a 1997 Belmont-Summitt Trailer because I was not notified of the bankruptcy prior to purchasing the estate in October of 2022. I am requesting that the item be removed from bankruptcy to rectify the information.

Enclosed are copies of the title
Supporting my position. Please reinvestigate this matter and delete the disputed item as soon as possible.

Sincerely,
Itavius Burks



Enclosures: Title, Bill of Sale, Tax Collector Receipts, Docket

Case No. 21-01647

Dkt. #37

DOCKET 1064, PAGE 74

ABSTRACT OF JUDGMENT FROM JUSTICE COURT

THE STATE OF MISSISSIPPI, SCOTT COUNTY:

Judgement was rendered as follows, viz: In the case of

ITAVIAS BURKS

VS.

DAVIS PATRICK AND CHARLOTTE

Tenant ~~has~~ report to
 Tenant premises at 11:00 AM
 10/06/23 prep by 3pm
 Plaintiff has

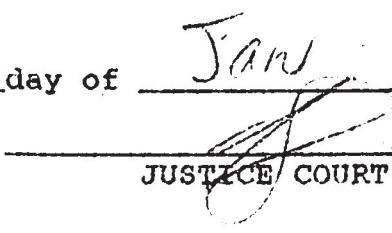
JUDGEMENT.....
ATTORNEY FEE.....
COST OF SUIT..... 95.50
TOTAL..... 95.50

2-6-23. Plaintiff has

Cart permission through 4:30 23
 to remove trailer. He also has right
 to take pics of trailer after
 they move out

I, ADAM MCCURDY, an acting JUSTICE of the PEACE in and for said County, do hereby certify that the above is a true and perfect abstract in the cause, therein stated and that it contains the names of all parties to said suit, the amount and date of rendition of said judgement, and that said judgement as appears from my docket, remains in full force and effect.

Witness my hand and seal this 25 day of JAN, 2023.


JUSTICE COURT JUDGE

Filed, recorded, and entered upon the judgement roll in my office, in conformity with law the _____ day of _____, 2023.

CIRCUIT CLERK

By _____, DC

CERTIFICATE OF TITLE

Form # 79-001

STATE OF MISSISSIPPI

ORIGINAL

VEHICLE IDENTIFICATION NUMBER	MAKE	YEAR	MODEL	BODY	TITLE NUMBER	TITLE TEXT (E.G. UNIT #)
33136	BELM	1997	SUMMIT	HS	MS0163186944	

TITLE DATE	DATE OF FIRST SALE FOR USE NEW ONLY	NO. CYL	NEW/USED	TYPE OF VEHICLE	ODOMETER - NO TENTHS
11/14/2022			USED	MH	

EXEMPT

BRANDS

OWNER(S)

BURKS, ITAVIAS
54 KERISH RD
FOREST MS 39074-2203

BENEFICIARY

1ST LIENHOLDER

DATE:

2ND LIENHOLDER

DATE:

MAIL TO

BURKS, ITAVIAS
54 KERISH RD
FOREST MS 39074-2203



LIEN SATISFACTION: THE UNDERSIGNED HOLDER OF ABOVE DESCRIBED LIEN(S) ON THE MOTOR VEHICLE DESCRIBED HEREON HEREBY ACKNOWLEDGES SATISFACTION THEREOF.

1ST LIEN _____ BY _____
(LIENHOLDER) (SIGNATURE AND TITLE)

THIS _____ DAY OF _____ 20 _____

2ND LIEN _____ BY _____
(LIENHOLDER) (SIGNATURE AND TITLE)

THIS _____ DAY OF _____ 20 _____

IN WITNESS WHEREOF I HAVE HEREUNTO SET MY HAND THIS

THE 14TH DAY OF NOVEMBER 2022



The Mississippi Department of Revenue hereby certifies that on application duly made, the person named herein is registered by this office as the lawful owner of the vehicle described subject to the liens or security interests as may subsequently be filed with the Mississippi Department of Revenue. This certificate of title is issued pursuant to the Mississippi Motor Vehicle Title Law Section 63-21-1, Mississippi Code of 1972, and subject to the provisions thereof.

CONTROL NUMBER

O 04326309

MISSISSIPPI DEPARTMENT OF REVENUE

VOID IF ALTERED

*****NOTICE: ANY ALTERATION OR ERASURE VOIDS THE ASSIGNMENT AND ALL ASSIGNMENTS THAT FOLLOW*****

Federal and State Law requires that you state the mileage in connection with the transfer of ownership. Failure to complete, or providing a false statement, may result in fines and/or imprisonment.

ASSIGNMENT OF TITLE BY REGISTERED OWNER

The undersigned hereby certifies that the vehicle described in this title has been transferred to the following printed name and address, with warranty to be free of all encumbrances except as shown at bottom of page.

Name Thomas DuffAddress 54 Mersh Rd. Forest, Ms 39076

"I certify to the best of my knowledge that the odometer reading is the actual mileage of the vehicle unless one of the following statements is checked.

**CAUTION: READ
CAREFULLY BEFORE
YOU CHECK A BLOCK**

ODOMETER READING (No Tenth)s

1. The mileage stated is in excess of its mechanical limits.
 2. The odometer reading is not the actual mileage.
 WARNING - ODOMETER DISCREPANCY

SELLER:

Signature(s) _____

Printed Name(s) _____

Date

of Sale _____

"I am aware of the above odometer certification made by seller"

BUYER:

Signature(s) _____

Printed Name(s) _____

SCRAPPED, DISMANTLED, OR DESTROYED VEHICLE - This is to be filled in by Vehicle Owner. Certificate of Title must be mailed or delivered to the Mississippi Department of Revenue. We hereby warrant that the Vehicle described on

20

Owner's Signature _____

FIRST RE-ASSIGNMENT BY LICENSED DEALER

The undersigned hereby certifies that the vehicle described in this title has been transferred to the following printed name and address, with warranty to be free of all encumbrances except as shown at bottom of page.

Name _____

Address _____

"I certify to the best of my knowledge that the odometer reading is the actual mileage of the vehicle unless one of the following statements is checked.

**CAUTION: READ
CAREFULLY BEFORE
YOU CHECK A BLOCK**

ODOMETER READING (No Tenth)s

1. The mileage stated is in excess of its mechanical limits.
 2. The odometer reading is not the actual mileage.
 WARNING - ODOMETER DISCREPANCY

DEALER OR AGENT:

Signature(s) _____

Printed Firm Name _____

Date

of Sale _____

"I am aware of the above odometer certification made by seller"

BUYER:

Signature(s) _____

Printed Name(s) _____

SECOND RE-ASSIGNMENT BY LICENSED DEALER

The undersigned hereby certifies that the vehicle described in this title has been transferred to the following printed name and address, with warranty to be free of all encumbrances except as shown at bottom of page.

Name _____

Address _____

"I certify to the best of my knowledge that the odometer reading is the actual mileage of the vehicle unless one of the following statements is checked.

**CAUTION: READ
CAREFULLY BEFORE
YOU CHECK A BLOCK**

ODOMETER READING (No Tenth)s

1. The mileage stated is in excess of its mechanical limits.
 2. The odometer reading is not the actual mileage.
 WARNING - ODOMETER DISCREPANCY

DEALER OR AGENT:

Signature(s) _____

Printed Firm Name _____

Date

of Sale _____

"I am aware of the above odometer certification made by seller"

BUYER:

Signature(s) _____

Printed Name(s) _____

THIRD RE-ASSIGNMENT BY LICENSED DEALER

The undersigned hereby certifies that the vehicle described in this title has been transferred to the following printed name and address, with warranty to be free of all encumbrances except as shown at bottom of page.

Name _____

Address _____

"I certify to the best of my knowledge that the odometer reading is the actual mileage of the vehicle unless one of the following statements is checked.

**CAUTION: READ
CAREFULLY BEFORE
YOU CHECK A BLOCK**

ODOMETER READING (No Tenth)s

1. The mileage stated is in excess of its mechanical limits.
 2. The odometer reading is not the actual mileage.
 WARNING - ODOMETER DISCREPANCY

DEALER OR AGENT:

Signature(s) _____

Printed Firm Name _____

Date

of Sale _____

"I am aware of the above odometer certification made by seller"

BUYER:

Signature(s) _____

Printed Name(s) _____

LIENHOLDER TO BE SHOWN ON NEW TITLE

Lien in favor of _____

whose address is _____

ALISON CRAPPS
SCOTT COUNTY
TAX ASSESSOR / COLLECTOR

100 EAST FIRST STREET • FOREST, MISSISSIPPI 39074
 601-469-4051

**SHERIFF'S SALE BY EXECUTION OF WARRANT, PURSUANT
 TO SECTION 27-41-107, MISSISSIPPI CODE ANNOTATED**

STATE OF MISSISSIPPI
 COUNTY OF SCOTT

BILL OF SALE

Be it known that MIKE LEE SHERIFF OF SCOTT COUNTY, did on the
31st day of October, 2022, according to law, sell the following
 described mobile home, situate in said county and assessed to Patrick K and Charlotte Davis.
 To wit: (description of mobile home) 1997 Belmont - Summit 28x52
Serial # 33136

For the taxes assessed thereon for the year 2022 when I taviaas Burks
 Became the best bidder therefore, at and for the sum of One hundred fifty dollars (\$150.00) (\$510.00 - 1 registered title)
 And the same being delinquent, I therefore, sell and convey said above described property to the said
I taviaas Burks

The undersigned sheriff of Scott County, Mississippi, nor any other official or agent of said county, has
 not made and does not make any representation or warranty whatever concerning TITLE to the above
 described mobile home.

GIVEN UNDER MY HAND AND OFFICIAL SEAL OF OFFICE, THIS THE 31st DAY OF October
2022.



Mike L

MIKE LEE, SHERIFF
 OF SCOTT COUNTY, MISSISSIPPI

BY: Charnell Sharp

PREVIOUS OWNER Patrick K. & Charlotte Davis

ADDRESS 743 Bunker Rd
Morton MS 39117

BUYER NAMES I taviaas Burks

ADDRESS 54 Kerish Road
Forest MS 39074

HOME PHONE NA
 WORK PHONE 601-697-6791
Cell

ACCOUNT # 6409



780022241000

DEPARTMENT OF
REVENUE
STATE OF MISSISSIPPI



Application #: L0428830848

County Code 620 - SCOTT

Date November 03, 2022 Fast Track Application

Lessor (if Leased)

Lessor Mailing Address

Owner(s) or Lessee(s) if Leased

BURKS, ITAVIAS

Registered Physical Address (DO NOT GIVE A PO BOX)

54 KERISH RD
FOREST MS 39074-2203 AND AND / OR OR

Registered Mailing Address (if Different)

Beneficiary

Vehicle ID 33136	Year 1997	Make BELM	Model SUMMITT	Body Style Manufactured Home
<input type="checkbox"/> Provisional VIN				
Vehicle Type Manufactured Home	Fuel Type	Primary Color Other		Secondary Color
Seats 0	Axles 0	Cylinders 0		Unladen Weight 0
Purchase Date October 31, 2022	New / Used Used	Odometer Reading 0		Odometer Code Exempt from Disclosure Requirements
Brands				
<input type="checkbox"/> Bonded <input type="checkbox"/> Collision <input type="checkbox"/> Fire <input type="checkbox"/> Flooded <input type="checkbox"/> Hail <input type="checkbox"/> Rebuilt <input type="checkbox"/> Salvaged <input type="checkbox"/> Wind				
<input type="checkbox"/> Recovered Theft <input type="checkbox"/> Unrecovered Theft <input type="checkbox"/> Junked <input type="checkbox"/> Other:				

Primary Lienholder's Information

Secondary Lienholder's Information

Date of Lien

Date of Lien

Designated Agent

SCOTT COUNTY TAX COLLECTOR

Designated Agent Number

62

IWE, THE UNDERSIGNED, CERTIFY THAT THE VEHICLE DESCRIBED ABOVE IS OWNED BY ME AND I HEREBY MAKE APPLICATION FOR A CERTIFICATE OF TITLE FOR SAID MOTOR VEHICLE, AND THIS VEHICLE WILL NOT BE SUBJECT TO LIEN PRIOR TO RECEIPT OF THE TITLE UNLESS INDICATED ABOVE.

****DISCLOSURE STATEMENT AND PRIVACY ACT NOTICE****
DRIVER'S LICENSE NUMBERS ARE REQUIRED BY STATE LAW AND WILL BE USED IN THE ADMINISTRATION OF STATE MOTOR VEHICLE LAWS. THE COMMISSION IS AUTHORIZED TO COLLECT THE INFORMATION PURSUANT TO 42 U.S.C. §405(c)(2)c AND MISS CODE ANN §63-21-15. TITLES AND REGISTRATION RECORDS MAY BE RELEASED ONLY PURSUANT TO 18 U.S.C. §§2721-2725. FAILURE TO PROVIDE THE INFORMATION WILL RESULT IN THE DENIAL OF A CERTIFICATE OF TITLE.

Nov 03, 2022

Date

Signature

Owner's Copy

123456789

First Owner/Lessee's Signature

License #

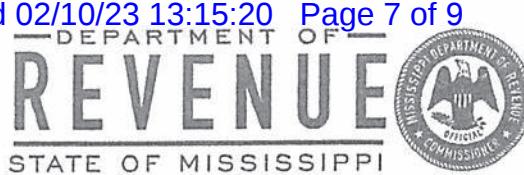
Print one copy for each of the following: MS Department of Revenue, Owner, Designated Agent, and Lienholder (if Applicable)

Joint Owner/Lessee's Signature

License #

Mississippi Department of Revenue, Motor Vehicle Services — P.O. Box 23049, Jackson MS 39225-3049 — www.dor.ms.gov — (P) (601) 923-7200

Receipt of Payment



OWNER (LESSOR) <u>BURKS, ITAVIAS</u>	LETTER ID <u>L0965701760</u>
CO-OWNER (LESSEE) _____	COUNTY CODE <u>MS123</u>
ADDRESS <u>54 KERISH RD</u>	TAXING DISTRICT _____
CITY, STATE, ZIP <u>FOREST, MS 39074-2203</u>	EXPIRATION _____
ISSUE DATE <u>November 03, 2022</u>	

VEHICLE

YEAR	MAKE	MODEL	BODY TYPE	VEHICLE TYPE	FUEL TYPE	CYLINDER	COLOR
1997	BELM	SUMMIT	Manufactured Home	Trailer		0	Other

VEHICLE IDENTIFICATION NUMBER	TITLE NUMBER	DECAL NUMBER	TAG NUMBER	TAG TYPE
33136	MS0163186944			

Total Due

10.00

State of Mississippi

SCOTT COUNTY
ALISON CRAPPS
100 EAST FIRST STREET
FOREST MS 39074

Miscellaneous Collections
Tax Year 2022

MXMMODP 62-0

Drawer: 9
User: CMS
Paid: Cash

Type: MH

Paid by: ITAVIUS BURKS

	Receipt # 15796	Date: 11/03/2022
Tax District		
Class 1 Value True Assessed	Class 2 Value	Total Value
Type of Tax	Millage	Gross Tax Amount
ITAVIUS BURKS 54 KERISH ROAD FOREST MS 39074		Total Tax Due \$0.00
Received by: _____	Amount Paid	346.22
	Grand Total Paid	346.22

*Customer
copy*

221103 1508 GSM QPADEV0003

LRMMODP - LRMMODP2 - 05/01/2016

